



**APPLICATION FOR PARTICIPATION IN THE
DEFERRED RETIREMENT OPTION PLAN (DROP)
EXCISE POLICE & CONSERVATION OFFICERS'
RETIREMENT PLAN**

State Form 53688 (8-08)

**EXCISE POLICE & CONSERVATION OFFICERS'
RETIREMENT PLAN**
143 West Market Street
Indianapolis, Indiana 46204-2899

* This agency is requesting disclosure of Social Security Numbers in accordance with Internal Revenue Code; disclosure is mandatory and this form will not be processed without it.

- INSTRUCTIONS:**
1. Please type or print. Use black ink.
 2. Complete all information.
 3. Return the completed form directly to PERF. **Do not return the instruction pages.**

STEP 1 - MEMBER INFORMATION

Social Security Number *		Date (month, day, year)
Name of member (first, middle initial, last)		
Address (number and street, city, state, and ZIP code)		
Home telephone number ()	Other telephone number ()	E-mail address

STEP 2 - DROP ELECTION DATES

DROP entry date (month, day, year) <i>You must be eligible to receive an unreduced annual retirement allowance by this date.</i>	DROP retirement date / effective date of retirement (month, day, year) <i>This must be at least twelve (12) months after your DROP entry date, but cannot be more than thirty-six (36) months after this date and must be on or before the mandatory retirement age.</i>
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MEMBER ACKNOWLEDGEMENT

I elect the above dates for participation in the Deferred Retirement Option Plan (DROP). I understand that in order to remain eligible for DROP benefits upon retirement, my choice for dates of entry and retirement under DROP cannot be changed after this form is received by the Excise Police and Conservation Officers' Retirement Plan. By signing below, I acknowledge that I have read and understand this statement.	
Signature of member	Date (month, day, year)
Printed name of member	

EXCISE POLICE & CONSERVATION OFFICERS' RETIREMENT PLAN
143 West Market Street
Indianapolis, Indiana 46204-2899

INSTRUCTIONS FOR COMPLETING STATE FORM 53688, APPLICATION FOR PARTICIPATION IN THE DEFERRED RETIREMENT OPTION PLAN (DROP) - EXCISE POLICE & CONSERVATION OFFICERS' RETIREMENT PLAN

IMPORTANT:

1. Remove the form. Do not return these instructions to PERF.
2. Please type or print. Use black ink.
3. Complete all information.
4. Return the completed form directly to PERF at the address below.

STEP 1: Member Information

Member's Social Security Number: Enter all nine digits of the Social Security Number.

Your application will not be processed without this information.

Date of Application: Enter the date you completed the application.

Member's Name: Enter the first name, middle initial, and last name.

Member's Address: Enter the full street address, city, state, and the five or nine-digit ZIP code.

Member's Telephone Number: Enter the telephone numbers, beginning with area code.

If available, please provide separate home and other telephone numbers.

E-mail Address: Enter the E-mail address, if available.

STEP 2: DROP Election Dates

DROP Entry Date: Please enter the date as MM/DD/YYYY. You must be eligible to receive an unreduced annual retirement allowance by this date. This date cannot be earlier than the date your DROP election form is mailed to the Excise Police and Conservation Officers' Retirement Plan.

DROP Retirement Date / Effective Date of Retirement: Please enter the date as MM/DD/YYYY. This date must be at least twelve (12) months after your DROP entry date, but cannot be more than thirty-six (36) months after your DROP entry date. This date can also be no later than the first day of the month following your sixty-fifth (65th) birthday. If you became a participant after turning fifty (50) years old, your effective date of retirement must be the earlier of: 1) the first day of the month following your sixty-fifth (65th) birthday, or 2) the first day of the month following your completion of fifteen (15) years of service.

IMPORTANT:

You may select any day of the month as a DROP entry date or a DROP retirement date. However, your DROP lump sum amount will be calculated based upon the number of completed calendar months. The length of the DROP period must be no less than twelve (12) months and no more than thirty-six (36) months.

Your DROP retirement date is the first day your retirement benefit is effective. Your retirement is effective on the first day of the month following your last day in pay status. Please choose this date carefully. In order to be eligible to choose DROP benefits, your employer must certify your last day of paid employment to the Excise Police and Conservation Officers' Retirement Plan.

Member Acknowledgement

Please read the notice that your choice of DROP entry date and DROP retirement date cannot be changed after this form is received by the Excise Police and Conservation Officers' Retirement Plan. Sign, print your name, and date the form to acknowledge that you have read and understand the notice; then return it to the Plan.

Once the form has been completed according to these instructions, return the form (DO NOT return the instructions) to the Excise Police and Conservation Officers' Retirement Plan at the following address:

Excise Police and Conservation Officers' Retirement Plan

143 West Market Street

Indianapolis, IN 46204

The Excise Police and Conservation Officers' Retirement Plan must receive this application prior to the DROP entry date.

MEMBER NOTE – CHANGES TO INFORMATION

If you have any changes to any of the information on this form, such as name or address, please notify the Excise Police and Conservation Officers' Retirement Plan immediately at the address above. Notifying the Plan will ensure that you receive correct and important information regarding your benefits and taxes.

HELPFUL INFORMATION

PERF

TELEPHONE NUMBERS:

Indianapolis & vicinity (317) 233-4162

Toll-Free Number 1-888-526-1687

TDD (hearing impaired number) (317) 233-4160

PERF FAX Number (317) 232-1614

PERF on the Internet: www.in.gov/perf

Excise Police and Conservation Officers' Retirement Plan

TELEPHONE NUMBERS:

Indianapolis & vicinity (317) 233-4146

The Excise Police and Conservation Officers' Retirement Plan may also be reached through the PERF toll-free number - just ask the operator.

FAX Number (317) 234-1529

EXCISE POLICE AND CONSERVATION OFFICERS' RETIREMENT PLAN MEMBER HANDBOOK (latest edition)

Internal Revenue Service

TELEPHONE NUMBERS:

Toll-Free Number 1-800-829-1040

TDD (hearing impaired number) 1-800-829-4059

TeleTax 1-800-829-4477

IRS website: www.irs.gov

E-MAIL: questions@perf.in.gov

IRS PUBLICATION 575, PENSION AND ANNUITY INFORMATION

IRS PUBLICATION 590, INDIVIDUAL RETIREMENT ARRANGEMENTS

Indiana Department of Revenue (DOR)

TELEPHONE NUMBERS:

Indianapolis & vicinity (317) 233-4018

TDD (hearing impaired number) (317) 233-4952

Individual Income Tax Questions (317) 232-2240

Outside of Indianapolis – See DOR website

DOR FAX Number (317) 233-2329

DOR website: www.in.gov/dor